abundance for all to read. Interpretation of these facts will remain an area of controversy until new methods for precise elucidation of the biological variations of each individual cancer become available.

J. ENGELBERT DUNPHY MD

RENAL DISEASE IN CHILDHOOD—Second Edition—John A. James, MB (Edin.), MRCP, DCH, Professor of Pediatrics, Department of Pediatrics, University of Southern California School of Medicine, Chief Physician, Pediatric Pavilion, Los Angeles County/USC Medical Center, Los Angeles, The C. V. Mosby Company, 11830 Westline Industrial Drive, St. Louis, MO (63141), 1972. 377 pages, \$23.50.

Dr. James' second edition of his book Renal Disease in Childhood is directed to the "non-nephrologist." He has written a useful book that will assist practicing physicians, housestaff, and students in understanding kidney disease in patients.

The sections describing disease entities are the book's strongest. The descriptions are short, clear and specific. Treatment, especially drug treatment is dealt with in a direct and useful manner, the tables are helpful. The author often invokes his own opinion in a pleasant way to provide a recommendation where no definitive statement is possible.

The discussion of physiology is less effective. The need for brevity precludes an in-depth discussion. The dilemma of all pediatric books is having to deal with the variables of age and size, be comprehensive in a subject and still be concise. Neither renal physiology nor body fluid physiology is dealt with authoritatively and the reader should depend on other sources, as the author, himself, seems to imply.

The sections on repeated urinary tract infections in girls appropriately develop the evidence of pro and con as to their potential for leading to renal failure. The author comes down on the side that renal failure rarely results; simple bacteremia may not be a major medical problem. This view heretical a short time back, is now gaining respectability.

His descriptions of nephrosis and glomulonephritis are also excellent. We disagree that the mechanism for edema in acute nephritis and nephrosis is the same, but overall the presentations are very useful.

The book can be recommended to its intended audience.

MALCOLM A. HOLLIDAY, MD

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RHEUMATIC FEVER—Second Edition—Volume II in the Series Major Problems in Clinical Pediatrics—Milton Markowitz, MD, Professor and Head, Department of Pediatrics, University of Connecticut School of Medicine, Farmington, Connecticut; and Leon Gordis, MD, Dr PH, Associate Professor of Epidemiology and of Medical Care and Hospitals, Johns Hopkins School of Hygiene and Public Health, and Associate Professor of Pediatrics, Johns Hopkins School of Medicine, Baltimore, Maryland. Alexander J. Schaffer, Consulting Editor. W. B. Saunders Company, Publisher, West Washington Square, Philadelphia, Pa. (19105), 1972. 309 pages, illustrated, \$11.50.

The incidence of rheumatic fever has markedly declined in the past few decades; in our own state the disease has become distinctly uncommon. It has not disappeared, however, and the physician confronted with clinical problems in this field more than ever needs to refresh and update his own knowledge about rheumatic fever. From its first publication in 1965, Dr. Markowitz and Dr. Kuttner's book on this subject has been the outstanding reference in its field. As Dr. Anne Kuttner has passed away, the second edition is prepared by Drs. Markowitz and Leon Gordis. This new edition has been rewritten to include the new studies and advances in rheumatic fever and in the biology of the streptococcus, including the work of Fox and Kaplan on the development of streptococcal vaccine and Wannamaker's studies

concerning the difference between the biology of streptococcal skin and throat infection. The references have been extensively revised and updated. The book contains sixteen chapters dealing with such topics as the biology of the streptococcus, the etiology, the pathology, diagnosis, course, treatment and prevention of rheumatic fever. The chapter on primary prevention deals with the diagnosis and management of streptococcal infection and streptococcal carriers. There are also three appendices, embodying the American Heart Association 1971 statements on the Jones Criteria for the Diagnosis of Rheumatic Fever, and on the prevention of the disease. A statement prepared by Dr. Lewis Wannamaker on the technique of obtaining a throat culture, streaking, reading, confirming and interpreting the results of the culture, is also included. The authors review the accumulated evidence in the literature, clearly present the controversial nature of some of the evidence, yet in the end, come out with their own clear cut recommendations which are of value to the reader. Their advice is particularly apparent and appreciated in the discussion about the use of steroids and aspirin in the treatment of rheumatic fever.

In summary, this is an authoritative and readable upto-date discussion of all aspects of rheumatic fever for the clinician. It should be made available on the shelf of hospital and medical libraries as a reference. Those physicians who are particularly interested in rheumatic fever as a subject or see more than a very occasional patient with this disease will want to have this book available in their personal library.

M. GROSSMAN, MD

BONE TUMORS—Fourth Edition—Louis Lichtenstein, MD, Clinical Professor of Pathology, University of California, San Francisco; Professor Extraordinario, National University of Mexico. The C. V. Mosby Company, 3207 Washington Blvd., St. Louis, Mo. (63103), 1972. 441 pages, 496 illustrations in 252 figures, \$24.50.

The usefulness and popularity of this work has been well demonstrated in the 20 years since the 1st edition. Now a new 4th edition has been published. The printing format is more legible, and the number of illustrations, chiefly radiographs, has been modestly increased.

Dr. Lichtenstein is one of the true giants in the field of bone tumors. In his own works or with collaborators like Jaffee we can follow the evolution of modern knowledge of bone pathology. From a confusing mass of anecdotal material he helped develop many of our current concepts. His name is intimately associated with a wide range of neoplastic and non-neoplastic bone conditions such as giant cell tumor, non-osteogenic fibroma, solitary cyst, chondroblastoma, chondromyxoid fibroma, aneurysmal bone cyst, chondrosarcoma, villonodular synovitis and others. This book is his testament.

It is a very personal book, a true monograph, written sharply and to the point. The style contrasts greatly with the thorough but rather dull multi-authored tomes now in fashion in medical literature. Because the text is short, the narrative frequently is somewhat dogmatic and avoids presenting alternative points of view in areas of controversy. One such area is the prognostic value of histologic grading of giant cell tumors. However, this drawback does not detract from the usefulness of this book, especially to residents and younger physicians. This is not a book one can refer to to for a discussion of modern biochemical concepts; rather it is the distillation of a lifetime of experiences with bone tumors.

There is little new in this edition, except for a brief chapter on certain rare primary tumors of bone such as leiomyosarcoma and malignant mesenchymoma. There is also a change in the concept of the unusual tumors called